DROP COURSE FORM

1.	General Information.							
a.	Submitted by the College of: The Graduate School Today's Date: December 2, 2011							
b.	Department/Division: The Martin School of Public Policy and Administration							
c.	Contact Person Name: William Hoyt Email: whoyt@uky.edu Phone: 257-2518							
2.	Course Information.							
a.	Course Prefix and Number: PA 749							
b.	Course Title: Dissertation Research							
c.	Credit Hours: (0)							
3.	Effective Date¹ of Drop: Semester Following Approval OR Specific Term²:							
4.	Is this course cross-listed? YES³ □ NO □							
	If YES ³ , what is the cross-listed course prefix and number?							
	If YES³, should the cross-listed course(s) also be dropped³? YES³ \ NO \							
	Explain, if necessary:							
5.	Why is the course being dropped? Graduate School rules regarding registration for dissertation residency credit have been changed. Course is no longer used and has been replaced by PA 767.							
6.	Will dropping this course change the requirements ⁴ for any program? YES NO							
:	If YES ⁴ , list the program(s) here:							
7.	Has the course been taken by a significant number of students in other colleges/depts?							
	If YES, list the colleges/departments:							
	If YES, what provision has been made for meeting the needs of these students?							
8.	Is this course currently included in the University Studies Program?							

¹ The effective date for a dropped course is *the first term when the course is not available*, <u>NOT</u> the last term the course is offered.

² Effective dates are typically the semester following approval. No course will be made effective until all approvals are received.

³ Signature of the chair of the cross-listing department is required on the Signature Routing Log.

⁴ In order to change a program, a program change form must also be submitted.

DROP COURSE FORM

Signature Routing Log

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Course to be Dropped (prefix and number): PA 749

Proposal Contact Person Name:

Sarah Lee

Phone: 7-5594

Email: solee@uky.edu

INSTRUCTIONS:

Identify the groups or individuals reviewing the proposal; note the date of approval; offer a contact person for each entry; and obtain signature of person authorized to report approval.

Internal College Approvals and Course Cross-listing Approvals:

Reviewing Group	Date Approved	Contact Person (name/phone/email)	Signature		
Martin School Faculty	12/1/11	William Hoyt / 7-2518 / whoyt@uky.edu	MM		
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External-to-College Approvals:

Council	Date Approved	Signature	Approval of Revision ⁵
Undergraduate Council			
Graduate Council			
 Health Care Colleges Council	1		
 Senate Council Approval		University Senate Approval	

Comments:	
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⁵ Councils use this space to indicate approval of revisions made subsequent to that council's approval, if deemed necessary by the revising council.